



Premium Contributions

The table below shows the employee contributions for the medical, dental and vision plans. Your portion of the cost(s) will be deducted from your paycheck on a pre-tax basis. The portion of the premiums paid by employees for civil union or domestic partner coverage will be withheld on a post-tax basis. The University portion of the premium paid for a civil union or domestic partner will be added to your earnings as taxable income.

Medical	Coplay Plan		HDHP-HSA Plan*	
	University of Denver Contributes	Employee	University of Denver Contributes	Employee
Employee Only	\$657.52	\$94.45	\$581.73	\$0.00
Employee & Spouse/Partner	\$1,105.13	\$393.46	\$990.02	\$168.61
Employee & Child(ren)	\$996.27	\$352.96	\$888.93	\$154.28
Family	\$1,477.25	\$618.74	\$1,322.99	\$297.01

*If you enroll in the HDHP and open a health savings account (HSA) through Rocky Mountain Reserve the University will contribute \$27.64 per month to your HSA.

Dental	Delta Base PPO Plan	Delta Enhanced PPO Plan	Beta Health Alpha Plan
Employee Only	\$29.92	\$49.94	\$10.75
Employee & Spouse/Partner	\$58.97	\$98.45	\$20.25
Employee & Child(ren)	\$70.95	\$118.40	\$23.25
Family	\$110.74	\$184.55	\$29.75

Vision	Base Plan	Enhanced Plan
Employee Only	\$6.34	\$8.85
Employee & Spouse/Partner	\$12.07	\$16.81
Employee & Child(ren)	\$12.71	\$17.72
Family	\$18.69	\$26.03

Premium Contributions (Cont'd)

Voluntary Life

Monthly Rates Per \$1,000 & Based on Attained Age as of July 1	Employee	Spouse
Under 20	\$0.05	\$0.05
20-24	\$0.05	\$0.05
25-29	\$0.06	\$0.06
30-34	\$0.08	\$0.08
35-39	\$0.09	\$0.09
40-44	\$0.10	\$0.10
45-49	\$0.15	\$0.15
50-54	\$0.23	\$0.23
55-59	\$0.43	\$0.43
60-64	\$0.66	\$0.66
65-69	\$1.27	\$1.27
70-74	\$2.06	\$2.06
75+	\$2.06	\$2.06

Voluntary AD&D

Monthly Rates Per \$1,000	
Employee Only	\$0.02
Employee + Family	\$0.03

Voluntary Accident

Monthly Rates	
Employee Only	\$9.92
Employee & Spouse/Partner	\$17.96
Employee & Child(ren)	\$22.90
Family	\$30.95

Voluntary Critical Illness

Monthly Rates Per \$10,000 & Based on Employee's Age	Employee Only	Employee & Spouse/Partner	Employee & Child(ren)	Family
0-29	\$2.49	\$3.98	\$3.71	\$5.22
30-39	\$4.42	\$6.84	\$5.65	\$8.07
40-49	\$8.16	\$12.75	\$9.39	\$13.98
50-59	\$16.19	\$25.77	\$17.42	\$27.01
60-69	\$25.85	\$41.31	\$27.08	\$42.53
70-79	\$45.53	\$70.56	\$46.76	\$71.78
80+	\$72.33	\$109.99	\$73.57	\$111.23